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CHAPTER 8. STATE/LOCAL REFERRAL AGENCY REPORTING REQUIREMENTS

- 8-1 Applicability. The following applies to Fair Housing complaints referred to State or local agencies for processing under the HUD Regulation 24 CFR Part 115 - Recognition of Substantially Equivalent Laws. As indicated in Chapter Three of this document, monitoring of Title VIII complaint processing by HUD Regional Compliance Staff shall be recorded on the HUD 930.1A. In addition, date of closure and result of closure activity for complaints handled by State and local agencies is also reported on the HUD 930.1A. All other information on processing of Title VIII complaints referred to State and local agencies deemed substantially equivalent shall be recorded on the HUD 948, State/Local Referral Agency Reporting Form.
- 8-2 General Instructions. A separate State/Local Referral Agency Reporting Form, HUD 948, shall be completed for each and every Title VIII complaint referred to State and handled by a State or Local Referral Agency. That is, for every complaint recorded on the HUD 930.1A as closed by a State or local agency, there will be completed a HUD 948. In general, the State/Local Referral Agency Reporting Form contains case identification information and case disposition information necessary for evaluation and assessment of the State or local agency's administration of its fair housing law to insure that the law is, in fact, providing substantially equivalent rights and remedies.
- 8-3 Procedure for Utilizing the HUD 948. The form is printed in color coordinated NCR paper.

After thirty (30) days, the regional staff should complete the top portion of the form (through respondent identification) retaining the white copy and forward the remaining forms to the referral agency for updating. The referral agency then updates and returns all copies to the regional office.

After sixty (60) days, the regional staff should retain the green copy of the form and forward the yellow, pink and gold copies to the referral agency for updating. The referral agency then updates and returns all copies to the regional office.

After ninety (90) days, the regional staff should retain the yellow copy and forward the pink and gold copies to the referral agency for further updating. After updating, the referral agency retains the gold copy for its record and returns to the regional office the pink copy.

The white copy should have "original copy" printed on it, the green, yellow and pink should have "return to region" and the gold copy should be printed "referral agency's copy."

The region shall keep one copy of the completed form in the Title VIII case folder and will make two copies and send to Headquarters, one copy will go to Office of Management and Field Coordination and the other to Office of Fair Housing and Section 3 Compliance.

8-4 Instructions for Completion of HUD 948

- a. State/Local Agency Case Number. Fifteen character free-form alpha numeric identification as provided for by the State or local agency.
- b. Date State/Local Agency Received Complaint. Date complaint was received from HUD by the State or local agency. Note that this and all succeeding dates shall be calendar dates entered in the six digit format YYMMDD indicating year, month and day. For example, January 31, 1976 shall be entered as 760131.
- c. Date Referred. Date on which the complaint was referred to the State or local agency for processing. This date should be identical to the date referred on the HUD 930.1A.
- d. Referral Agency. Name or other appropriate identification of State or local agency to whom complaint has been referred. Care should be taken to ensure that whatever identification is used, that it be consistently recorded on each and every complaint in exactly the same manner. This is necessary to aggregate and summarize all activity by a particular State or local agency. Note also that this and all name fields are limited to 25 characters.
- e. HUD Case Number. Twelve digit file number (exclusive of the special indicator) as recorded on the HUD 930.1A.
- f. HUD Monitor. Last name and initials of the FHEO Specialist assigned to monitor this complaint.

- g. Date Received by HUD. Date on which the final information on the closed case is received by the HUD-FHEO Specialist assigned to monitor the case.

- h. Complainant's Name. Last name and initials of the complainant. (Note that 25 positions of name fields will be input to the automated complaint and compliance system).
- i. Address (Complainant's). Free-form item containing location of complainant. (This item of information is not electronically stored in the automated system).
- j. Phone (Complainant's). Free-form item containing the phone number where the complainant may be reached. (This information item is not electronically stored in the automated system).
- k. Respondent's Name. Last name and initials of the respondent. Care should be taken to consistently record the name of this respondent each time he is recorded in the system. This is necessary to facilitate retrieval of multiple offender information.
- l. Address (Respondent's). Free-form item containing the location of the respondent. (This item of information is not electronically stored in the automated system).
- m. Phone (Respondent's). Free-form item containing the phone number where the respondent may be reached. (This information item is not electronically stored in the automated system).
- n. Basis. See page 14, Item j.
- o. Issue. See Page 15, Item k.
- p. Date Assigned. Date on which the complaint is assigned to responsible individual within the agency for handling.
- q. Date Investigation Commenced. Date of initiation of investigative activity by responsible staff person.
- r. Date Investigation was Completed. Date on which the final investigation report is completed and transmitted to the responsible official for a decision on probable cause.

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- s. Date Conciliation was Completed. Date on which all conciliation activities are completed.
  - t. Date Case was Closed. Date on which the case is considered closed by the State or local agency.

- u. Conciliation in Process. "Yes" is checked if conciliation has begun but has not been completed during the current status check period; otherwise check "no". Note that this item is for use by the HUD monitor only and shall not be input to the automated system.
- v. Investigation Results. Appropriate item is checked to describe the results of investigation. Only one checked item is permissible to indicate investigation results.
- w. Final Disposition. Appropriate item is checked to indicate final disposition of the case. This item may be left blank if not applicable to this complaint. Only one checked item is permissible to indicate final disposition.
- x. Date of Status Report. Appropriate item is checked to indicate latest status report made. All items should eventually be checked. Note that this item is for use by the HUD monitor only and shall not be input to the automated system.
- y. Conciliated. Appropriate item is checked to indicate whether or not conciliation activity took place.
- z. Conciliation Results. Appropriate item is checked to indicate outcome of conciliation efforts. Only one item may be checked.
- aa. Relief Obtained. Appropriate items are checked to indicate the type of relief and amount of any monetary compensation obtained as a result of conciliation. Any number of multiple entries are permissible.
- bb. Does Conciliation Agreement Provide for Future Monitoring of Respondent's Operation. Appropriate item is checked to indicate whether or not monitoring is provided for in the conciliation agreement.
- cc. Agency Investigator. Name of investigator responsible for complaint at State or local agency. This item is not input to the automated system.